Program Legislative Budget

The following table summarizes the legislative budget proposal for the program by year, type of expenditure, and source of funding.

Program Legislative Budget								
	Base	PL Base	New	Total	PL Base	New	Total	Total
	Budget	Adjustment	Proposals	Leg. Budget	Adjustment	Proposals	Leg. Budget	Leg. Budget
Budget Item	Fiscal 2004	Fiscal 2006	Fiscal 2006	Fiscal 2006	Fiscal 2007	Fiscal 2007	Fiscal 2007	Fiscal 06-07
FTE	157.03	0.00	14.00	171.03	0.00	14.00	171.03	171.03
Personal Services	6,747,304	713,572	590,842	8,051,718	707,437	589,214	8,043,955	16,095,673
Operating Expenses	20,269,621	5,118,084	5,985,340	31,373,045	5,118,351	5,738,286	31,126,258	62,499,303
Equipment	132,349	0	0	132,349	0	0	132,349	264,698
Capital Outlay	0	0	0	0	0	0	0	0
Grants	6,664,753	632,000	1,160,000	8,456,753	632,000	0	7,296,753	15,753,506
Benefits & Claims	9,112,972	0	0	9,112,972	0	0	9,112,972	18,225,944
Transfers	0	0	0	0	0	0	0	0
Debt Service	37,587	0	0	37,587	0	0	37,587	75,174
Total Costs	\$42,964,586	\$6,463,656	\$7,736,182	\$57,164,424	\$6,457,788	\$6,327,500	\$55,749,874	\$112,914,298
General Fund	1,852,039	74,855	775,917	2,702,811	71,407	(545,928)	1,377,518	4,080,329
State/Other Special	5,320,797	516,372	5,353,949	11,191,118	518,572	5,268,381	11,107,750	22,298,868
Federal Special	35,791,750	5,872,429	1,606,316	43,270,495	5,867,809	1,605,047	43,264,606	86,535,101
Total Funds	\$42,964,586	\$6,463,656	\$7,736,182	\$57,164,424	\$6,457,788	\$6,327,500	\$55,749,874	\$112,914,298

Page Reference

Legislative Budget Analysis, B-84

Funding

The Public Health and Safety Division (PHSD) is funded by a combination of general fund, state special revenue and federal funds. General fund supports about 4 percent of the base budget rising to 5 percent of the 2007 biennium appropriation. Federal funds decline from 83 to 77 percent of division funding from the FY 2004 base compared to the 2007 biennium appropriation. State special revenue shows the greatest change rising from 12 percent of the base budget to 18 percent of the 2007 biennium appropriation, largely due to the addition of tobacco settlement revenue to fund tobacco prevention and control.

General fund supports a share of the state match requirement for the Maternal and Child Health (MCH) block grant through the genetics contract (\$600,000 annually), some public health laboratory, tumor registry, communicable disease, tobacco control and prevention, and division administration functions; and the End State Renal Program (about \$92,000) annually with authorization in 50-44-102, MCA). The legislature approved the executive request to add \$1.3 million to support the MIAMI (Montana Initiative for the Abatement of Mortality in Infants) program, poison control hot line, and AIDS treatment and prevention activities. These three activities had been funded through a one-time diversion of tobacco settlement funds for the 2005 biennium (SB 485 passed by the 2003 Legislature). The legislature also added \$60,000 general fund and restricted the appropriation use to tribal peer counseling for tobacco cessation.

Major state special revenue sources include:

- o Tobacco settlement funds that support tobacco prevention and control activities
- o Payments for public and environmental laboratory services
- o Fees paid to license restaurants and lodging facilities
- o Fees paid by insurance companies and group insurers for each resident covered by health insurance or disability insurance (SB 275)

There are 50 federal funding sources that support PSHD functions, including 2 block grants and more than 30 federal categorical grants that have explicit programmatic and expenditure requirements. Usually, the purpose of the grant can be deduced from its name.

The single larges federal grant funds the WIC (Women, Infant and Children) feeding program, which accounts for 31 percent (\$13 million) of FY 2004 base budget funding rises to \$14 million in FY 2007. Federal funds supporting activities designed to help respond to or prevent bioterrorism events are the next most significant federal source, accounting for 14 percent of budgeted funds and rising from \$6 to \$7 million in FY 2007. Other federal funding sources that provide in excess of 3 percent of PHSD funding, listed in descending order, are:

- 1. Family planning Title X funds (2.5 percent to \$2.4 million) support reproductive health services for low-income persons;
- 2. Breast and cervical cancer funding (1.8 percent to \$2.1 million) supports cancer screenings for persons with incomes below 200 percent of the federal poverty level and no health insurance (see DPHHS overview for poverty level table); and
- 3. AIDS funding (1.3 percent to \$1.4 million) supports services to prevent AIDS as well as assist persons in obtaining treatment.

Two federal block grants account for about 4 percent of the PHSD 2007 biennium appropriation - the Maternal Child Health (MCH) Block Grant (\$1.7 million annually) and Preventive Health Block Grant 9\$0.9 million annually). These block grants support a variety of PHSD functions and both are allocated in consultation with division advisory councils. Usually the allocation is different than anticipated in the budget request and, absent specific legislative restrictions, different than the legislative appropriation.

A significant share of the MCH supports contracts with counties (\$1 million annually during the 2007 biennium) to provide the preventive and primary services for children required in federal guidelines. The match for the grant comes from local expenditures reported to PHSD. A portion (30 percent - \$0.9 million annually in the 2007 biennium) of the MCH is budgeted in the Health Resources Division (HRD) to provide services for children with special needs.

Program Narrative

The legislature accepted the executive budget request in most instances, including appropriation of state special revenue and federal funds to support 14.00 new FTE. Three of the new positions were approved contingent on funding being available and with the caveat that continuation of the funding for these FTE could not be requested if federal funds declined or were not going to continue. The most significant legislative changes are:

- o Addition of \$1.7 million in state special revenue and an offsetting reduction of \$1.1 million state special revenue over the biennium for a creation of a state special revenue account to receive an increase from 70 cents to \$1 in the fee charged for each person insured under an employer, group health, or single payer health or disability insurance police, contingent on passage and approval of SB 275
- o Addition of \$60,000 general fund for a Tribal peer counseling program
- o Restriction for inclusion of FTE slots in personal services base funding calculations for several federal grants if the funds decline or are not received
- O Addition of language in HB 2 directing the department to work with the Department of Administration, legislative staff, and of the Office of Budget and Program Planning to update and clarify accounting guidance on use of specific categories of expenditure with the goal of recording expenditures that support non state, local entities that provide direct, discreet benefits to individuals or indirect public benefits in either the grant or benefit category of expenditure, rather than operating costs
- o Inclusion of language in the narrative accompanying HB 2 requesting the department to coordinate a state government wide approach to tobacco control and prevention

The major appropriation changes compared to base budget expenditures that were adopted by the legislature include:

- o Tobacco prevention and control activities \$6.8 million tobacco settlement state special revenue and \$0.6 million in federal grant funds
- o Bioterrorism and emergency preparedness activities \$5 million federal grant funds
- o WIC program \$1.4 million federal grant funds
- o Cardiovascular health activities \$1.2 million federal grant funds
- o MIAMI \$1.1 million general fund

- O Public health laboratory activities \$0.6 million state special revenue fee income and \$0.7 million federal grant funds
- o Food and lodging license activities, primarily pass through funding to local governments \$0.6 million state special revenue license fee income
- o Genetics program net state funding increase of \$0.5 million

Legislative Direction to Staff

The 2005 Senate Finance and Claims Committee directed that the following language be placed in the narrative accompanying HB 2.

"Public Health and Safety includes tobacco settlement state special revenue funds and federal funds for tobacco prevention and control. The department shall encourage, either through mandates or by cooperation, opportunities to help reduce tobacco use and assist those who wish to curtail or stop their use of tobacco products through the following approaches.

The department is encouraged to identify opportunities to incorporate brief tobacco cessation counseling using the United States public health services 5 a's approach (ask, advise, assess, assist, and arrange) into work done by other department programs, such as the women, infants, and children (WIC) feeding program, temporary assistance for needy families (TANF) program, Medicaid services programs, children's health insurance program (CHIP), the Montana initiative for the abatement of mortality in infants (MIAMI) program, the mental health services plan (MHSP), and aging services. The Montana tobacco use prevention program is encouraged to provide training and educational materials to promote the 5 a's approach.

When appropriate, information mailed to recipients of state-supported programs should routinely include the quit line information. State owned and operated inpatient facilities should allow and encourage patients to access the quit line and nicotine replacement therapy.

When it will not create a perceived burden on providers, Montana medicaid providers should be encouraged to incorporate brief tobacco cessation counseling into office visits and tracking systems. The Montana tobacco use prevention program should provide:

- 1. training to providers and ancillary staff regarding the 5a's approach;
- 2. chart stamps to document tobacco use and the 5a's approach; and
- 3. chart audits to health care providers, beginning with larger providers.

When appropriate the department should request that medicaid provider mailings include the quit line information every 6 months.

If Medicaid-eligible persons participate in the quit line or in another evidence-based cessation counseling program, the department should consider:

- 1. eliminating the medicaid copayment for nicotine replacement therapy;
- 2. extending the limit for medicaid-funded nicotine replacement therapy coverage;
- 3. allowing persons to obtain nicotine replacement therapy directly from the quit line; and
- 4. exploring whether quit line services provided to medicaid-eligible persons are an allowable medicaid cost for federal financial participation.

The department should encourage all state departments to incorporate smoking cessation policies, including potentially:

- statewide contract language requiring statements that the offeror, or subcontractors, willnot accept any work involved in the production, processing, distribution, promotion, sale, or use of tobacco products or tobacco companies during the term of this contract and that the contractor shall provide evidence of a tobacco-free workplace policy;
- 2. state cigarette and tobacco tax insignia showing the quit line phone number;
- 3. correction facilities allowing inmates to access the quit line, including nicotine replacement therapies;

- 4. state employees' insurance coverage, including coverage for cessation and nicotine replacement therapies;
- 5. state motor vehicles being smoke free;
- 6. travel promotion promoting smoke-free facilities;
- 7. state employee wellness programs providing peer-support groups for those employees participating in quit line counseling; and
- 8. public schools, colleges, and universities receiving state money adopting comprehensive tobacco free policy and foregoing the use of tobacco industry-produced materials.

The department shall report in writing to members of the 2005 legislative joint appropriations subcommittee on health and human services by July 1, 2005, and then by July 1, 2006, on progress in implementing these recommendations. The report must include measurements of progress on the recommendations and also the rationale as to why certain recommendations were either not implemented or were not successful."

Present Law Adjustments

The "Present Law Adjustments" table shows the primary changes to the adjusted base budget adopted by the legislature. "Statewide Present Law" adjustments are standard categories of adjustments made to all agencies. Legislative decisions on these items were applied globally to all agencies. The other numbered adjustments in the table correspond to the narrative descriptions.

Present Law AdjustmentsFiscal 2006							Fiscal 2007						
	General State Federal						General	State	Federal	Total			
FI	ΓE Fun			Special	Total Funds		Fund	Special		Funds			
Personal Services					1,037,641					1,033,958			
Vacancy Savings					(311,394)					(311,250)			
Inflation/Deflation					(4,671))				(4,485)			
Fixed Costs					23,672					27,751			
Total Statewid	e Present Law Ao	djustments			\$745,248	;				\$745,974			
DP 96 - Increase Fund	ding for Local Boa	ard Inspection Fun	ds										
	0.00	0	159,000	0	159,000	0.00	0	159,000	0	159,000			
DP 102 - Additional A	•	* *											
	0.00	0	72,000	0	72,000	0.00	0	72,000	0	72,000			
DP 124 - Fully Imple		Preparedness	0	1.026.020	1.026.026	0.00	0		1 022 220	1 022 220			
DP 128 - Fully Imple	0.00	0 	0	1,026,038	1,026,038	0.00	0	0	1,022,238	1,022,238			
Dr 126 - runy imple	0.00	0	0	1,166,050	1,166,050	0.00	0	0	1,165,852	1,165,852			
DP 129 - Expanded V		•	U	1,100,030	1,100,030	0.00	Ü	· ·	1,105,652	1,105,652			
DI 12) Expanded (0.00	0	0	445,000	445,000	0.00	0	0	445,000	445,000			
DP 130 - Increase Fu				,	,		_	-	,	,			
	0.00	0	0	300,000	300,000	0.00	0	0	300,000	300,000			
DP 131 - Increase Fu	nding for Obesity	Prevention Grant											
	0.00	0	0	274,971	274,971	0.00	0	0	274,971	274,971			
DP 133 - Increase Fu	C	Ç											
	0.00	0	0	175,000	175,000	0.00	0	0	175,000	175,000			
DP 134 - Increase Fu			0	1.00.000	1.00.000	0.00	0		1.60.000	1.60.000			
DD 126 J	0.00	0	0	168,000	168,000	0.00	0	0	168,000	168,000			
DP 136 - Increase Fu	0.00	10sis Grant 0	0	100,000	100,000	0.00	0	0	100,000	100,000			
DP 137 - Increase Fu		*	U	100,000	100,000	0.00	U	0	100,000	100,000			
Dr 137 - Iliciease rui	0.00	Zation Grant O	0	78,000	78,000	0.00	0	0	78,000	78,000			
DP 138 - Increase Fu		•		70,000	70,000	0.00	O	0	70,000	70,000			
DI 100 Increase I a	0.00	0	0	61,000	61,000	0.00	0	0	61,000	61,000			
DP 139 - Increase Fu	nding for STD Pre	evention		· ·	,					,			
	0.00	0	0	44,000	44,000	0.00	0	0	44,000	44,000			
DP 140 - Increase Fu	nding for Health T	Trend Monitoring											
	0.00	0	0	35,000	35,000	0.00	0	0	35,000	35,000			
DP 141 - Increase Fu	•												
DD 160 M	0.00	0	0	18,000	18,000	0.00	0	0	18,000	18,000			
DP 169 - Montana Ca		th Program 0	0	501.000	501.000	0.00	0		501.000	501.000			
DP 170 - MT Tobacc	0.00	0	0	591,000	591,000	0.00	0	0	591,000	591,000			
DF 170 - WII 100acc	0.00	Quit Line 0	0	356,024	356,024	0.00	0	0	356,024	356,024			
DP 171 - MT Tobacc		o o	U	330,024	330,024	0.00	Ü	· ·	330,024	330,024			
DI 171 WII TOOLEE	0.00	0	0	(137,000)	(137,000)	0.00	0	0	(137,000)	(137,000)			
DP 176 - Increase Fu		ve Health Block G		(,)	(-2.,000)				(,)	(,,			
	0.00	0	0	167,000	167,000	0.00	0	0	167,000	167,000			
DP 185 - Increase Fu													
	0.00	0	0	632,000	632,000	0.00	0	0	632,000	632,000			
DP 9999 - Statewide	FTE Reduction 0.00	(12,675)	0	0	(12,675)	0.00	(15,271)	0	0	(15,271)			
Total Other Pr	esent Law Adjus	tments											
Tomi Omei II	0.00		\$231,000	\$5,500,083	\$5,718,408	0.00	(\$15,271)	\$231,000	\$5,496,085	\$5,711,814			
Crond Total A	ll Present Law A	diustmorts			\$6 A62 654	•				¢6 /57 700			
Granu Total A	ii Fresent Law A	ujusunents			\$6,463,656	•				\$6,457,788			

<u>DP 96 - Increase Funding for Local Board Inspection Funds - The legislature added \$159,000 state special revenue each year for increased funding for Food and Consumer Safety Section (FCSS) Local Board Inspection Funds License fee due to the increases in license fees for retail and wholesale food establishments that were raised by the 2003 Legislature. A portion of that increase is implemented in 2005.</u>

Base expenditures for local county board grant funds in FY 2004 were about \$0.6 million. These fees are passed through to local county programs to perform licensing and inspection activities.

<u>DP 102 - Additional Authority for Lab Supplies - The legislature added \$72,000 each year of the biennium for state special spending authority due to anticipated testing workload increases in the public health and environmental laboratories. Testing fees are the source of state special revenue and will be used to purchase additional supplies. The increase is about 10 percent. The base budget expenditures for supplies were \$0.7 million.</u>

<u>DP 124 - Fully Implement Emergency Preparedness - The legislature approved \$1,026,000 each year of the biennium for federal spending authority for increased funding for public health emergency preparedness. The base budget was about \$6 million.</u>

Funds would be used to continue to address grant-required standards and critical capacities, which are currently under revision by the Centers for Disease Control (CDC) and may include some new requirements. The funding would be used for:

- o Continuous testing, improvement and upgrading of local, regional and state plans, protocols, equipment and response systems. An emphasis continues on integration of public health and hospital emergency response with existing local, regional, state and federal response systems and assets
- o Strengthening state and local-level food and water borne illness investigation, and response capabilities
- o Enhancing active and passive surveillance in cooperation with local public health agencies and health care providers to provide early identification of public health threats
- Continuing development of laboratory capacity for adequate response to a chemical terrorism event, including
 physical plant renovation as well as the purchase of additional equipment necessary to meet CDC expectations.
 DP 187 also requests a laboratory chemist to assist with implementation of new equipment and testing procedures
 related to preparedness
- o Expanding technological capacity of the state, county and tribal public health system to better support both routine and emergency operations at the local level (i.e., installing cost-effective connectivity and merging immunization and emergency preparedness software functionality)
- Ocontinuing public health and emergency preparedness training to hone the skills of state and local public health personnel in the areas of advanced incident command systems, use of communication and information technology, conducting and using the results of preparedness drills and exercises, and understanding legal issues in emergency preparedness

<u>DP 128 - Fully Implement Hospital Emergency Preparedness - The legislature approved an additional \$1,166,000 each year of the biennium for federal spending authority for increased funding for public health emergency preparedness, specifically for hospitals. Including this appropriation, the annual amount in the 2007 biennium will be nearly double what was spent for this function in FY 2004.</u>

The hospital emergency preparedness funding is directed toward hospitals, outpatient facilities and emergency medical services systems to improve facility surge capacity in the following priority areas: beds, personnel, isolation, quarantine, personal protective equipment, decontamination, pharmaceuticals, trauma, mental health, transportation, and communications.

<u>DP 129 - Expanded West Nile Activities - The legislature approved \$445,000 federal authority each year of the biennium for increased funding for the Epidemiology and Lab Capacity Cooperative agreement. This grant has increased to fund expanded West Nile activities in Montana. Base budget expenditures were \$319,534.</u>

<u>DP 130 - Increase Funding for Breast & Cervical Cancer - The legislature approved \$0.3 million in federal funds each year of the biennium for the Montana Breast and Cervical Health Program. Base expenditures for this program were \$1.8 million.</u>

The 2007 biennium budget supports performance based contracts and provider reimbursement for breast and cervical cancer screening for 3,000 women. The additional \$300,000 will fund local screening of at least 600 additional women each year, and will reimburse medical service providers for additional clinical screening services, including provider recruitment activities.

Breast and cervical cancer screenings are provided to persons under the age of 65, with incomes under 200 percent of the federal poverty level, and with no health insurance. Persons diagnosed with breast or cervical cancer through this screen can receive treatment through the state Medicaid program.

<u>DP 131 - Increase Funding for Obesity Prevention Grant - The legislature added an additional \$274,971 in federal grant funds each year of the biennium for obesity prevention activities, more than doubling adjusted base budget expenditures of about \$237,000. The additional funds would be used to fund interventions within Montana communities, work sites, and schools to promote healthy nutrition and regular physical activity. Currently, PHSD funds three community pilot projects to implement community and school-based interventions. The additional funds would be used to expand services to more Montana communities and schools during the biennium. The legislature requested that DPHHS provide specific progress reports prior to the next session on outcomes related to this grant.</u>

<u>DP 133 - Increase Funding for Biomonitoring - The legislature approved an increase of \$175,000 federal authority each year of the biennium for biomonitoring. The grant funds are used to investigate human exposure to chemical contaminants in the environment. Montana is a member of a consortium comprised of six mountain states including Arizona, New Mexico, Utah, Colorado and Wyoming, who have common interests in investigating for environmental contaminants that affect the human population.</u>

The biomonitoring grant funds will be used to test and measure specific chemical constituents in human serum/urine with the intent of identifying environmental chemical contaminants deemed harmful to humans. No human testing related to this grant is currently being performed in Montana. Previous grant funds have been used for start-up purposes (primarily personnel and plan development with a consortium). The additional grant funds would be used to offset the cost of testing and may involve the purchase of laboratory equipment.

<u>DP 134 - Increase Funding for Ryan White AIDS Grant - The legislature added \$168,000 of federal Ryan White Title II grant funds each year of the biennium.</u> Base budget expenditures for treatment funding were \$1.5 million of the \$2.2 million in federal grant funds. The increased funding would allow the state to take advantage of expanded treatment funding by matching with state special revenue requested in DP 3011 – AIDS Biennial.

<u>DP 136 - Increase Funding for Tuberculosis Grant - The legislature approved \$100,000 federal authority each year of the biennium for the Tuberculosis Elimination Cooperative Agreement.</u> Base year expenses were \$205,663.

<u>DP 137 - Increase Funding for Immunization Grant - The legislature added \$78,000 federal funds each year of the biennium for increased immunization activities. Cooperative agreements for calendar year 2004 have increased the available funding. Base budget expenditures for direct immunization activities were about \$336,000.</u>

This funding supports DPHHS staff who conduct on-site assessments of public and private vaccine practices, and who provide feedback and technical assistance to assist clinicians in increasing coverage rates.

The funds support continued development of an immunization registry to track vaccine coverage rates across provider and county lines, and the majority of funds would be used to contract with local public health departments to carry out immunization activities including:

- o Immunization registry maintenance and recording of immunizations for children served in the public and private sectors
- o Assessment of vaccine history for children accessing WIC clinics, children being cared for in out-of-home child care settings, and children entering kindergarten in one school per county per year
- o Updating pandemic influenza plans for each county health department, in cooperation with county emergency planners
- <u>DP 138 Increase Funding for Rape Prev & Sexual Assault The legislature approved an increase of \$61,000 federal</u> funds for an increase in the Rape Prevention and Sexual Assault grant each year of the biennium. Base budget expenditures for direct services were \$131,000. As with base program expenditures about 90 percent of the additional funds would be used to contract with local service providers to enhance prevention, counseling, testing and treatment services.
- <u>DP 139 Increase Funding for STD Prevention The legislature added \$44,000 federal funding each year of the biennium for the Sexually Transmitted Diseases program.</u> Base budget expenditures for laboratory testing were \$124,000.
- <u>DP 140 Increase Funding for Health Trend Monitoring The legislature approved an additional \$35,000 in federal funds each year of the biennium for the Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS is conducted nationwide and has been collecting and reporting health survey data since 1984. It is a key source of information on health trends, risks for disease, access to health care, and health-related practices of Montanans. The information is used to identify important health issues, formulate helpful strategies and policies to improve the health status of Montanans and to evaluate health services and programs. The increased funding will allow the information from the survey to be more widely disseminated and better utilized for health improvements. Base year expenditures were about \$197,000.</u>
- <u>DP 141 Increase Funding for Diabetes Control Program The legislature added \$18,000 in federal funds each year of the biennium for the Diabetes Control Program. Adjusted base budget expenditures were \$712,000. The Diabetes Control Program collaborates with primary care providers and diabetes educators across the state to improve diabetes care, and to increase access to quality diabetes education. The additional funds would be used to support the existing primary care practices in the quality improvement network and to work with new primary care practices over the biennium.</u>
- <u>DP 169 Montana Cardiovascular Health Program The legislature approved \$591,000 each year of the biennium for federal spending authority for the Montana Cardiovascular Health Program. Adjusted present law base year expenditures were \$429,000. Increased funding would enhance program efforts statewide targeting improved care for Montanans with heart disease, stroke, hypertension, and high cholesterol.</u>
- <u>DP 170 MT Tobacco Use Prevention Quit Line The legislature added \$356,024 federal authority each year of the biennium to fund increased access to the tobacco use cessation toll free quit line, doubling FY 2004 base budget expenditures. In the first six months of operation, the quit line provided services to over 1,700 Montanans. The increased funding would allow an additional 2,000 Montanans per year to access the quit line.</u>
- <u>DP 171 MT Tobacco Use Prevention Base Funding The legislature accepted the executive request to reduce federal authority by \$137,000 each year of the biennium for the Montana Tobacco Use Prevention Program. DPHHS received notice that the federal funds were being reduced. Base budget federal funding was \$831,780. Reductions will be more than offset due to approval of DP 1011 Montana Tobacco Use Prevention Program, which increases funding by about \$4.5 million per year.</u>

<u>DP 176 - Increase Funding - Preventative Health Block Grant - The legislature approved \$167,000 federal funds each year of the biennium for increased appropriations from the Public Health Block grant. The funds are available due to carry over of unexpended grant funds. The state has three years to spend the block grant. Base budget expenditures were about \$678,000.</u>

<u>DP 185 - Increase Funding for Women, Infants & Children - The legislature added \$0.6 million each year of the biennium for federal funding for the WIC grant. The WIC grant is projected to be \$14 million for each year of the biennium. Base year funding was \$13 million.</u>

The legislature expressed concerns that the amount of WIC grant funds passed through to local programs was declining. DPHHS staff testified that it will make changes in how the local programs are audited, shifting the work to program staff rather than department cost allocated staff. That change will reduce administrative costs by about \$40,000, which will be passed through to local county health departments.

<u>DP 9999 - Statewide FTE Reduction - The legislature accepted the executive proposal for an FTE funding reduction equivalent to those taken in the 2003 legislative session. The reduction adds additional vacancy savings equivalent to 0.29 FTE and removes \$28,000 general fund for the biennium.</u>

New Proposals

New Proposals			Fiscal 2	006					Fisca	al 2007		
D	EFF	Genera	1 State]	Federal	Total	EVE	Gener	al Sta	ate	Federal	Total
Program	FTE	Fund	Speci	ial i	Special	Funds	FTE	Fund	Sp	ecial	Special	Funds
DP 101 - Prior Y	ear Authorit	tv-Local Inspe	ection Funds -	ОТО								
)7	0.00	0	100,000	0	100,00	0 0.	.00	0	100,000	0	100,000
DP 117 - Clinica	d Laboratory	Specialist Specialist										
)7	1.00	0	45,880	0	45,88	0 1.	.00	0	45,752	0	45,752
DP 155 - Rural A	Access to En	nergency Devi	ices Grant	- ,		-,				- ,		- ,
)7	0.00	0	0	275,000	275,00	0 0.	.00	0	0	275,000	275,000
DP 156 - Compr	ehensive Ca		Program		,	,					=,	,
)7	0.00	0	0	150,000	150,00	0 0	.00	0	0	150,000	150,000
DP 158 - Smoke	Detector &		n Grant	Ü	150,000	150,00	0.	.00	Ü	Ü	120,000	120,000
)7	0.00	0	0	145,000	145,00	0 0	.00	0	0	145,000	145,000
DP 159 - Statew			-	U	1-5,000	143,00	0.	.00	O	Ü	145,000	145,000
	ide Emergen)7	3.00	0	0	135,818	135,81	8 2	.00	0	0	135,440	135,440
DP 160 - Early C			0	-	133,616	133,61	0 3.	.00	U	U	155,440	133,440
	Minanooa Co)7	0.00	0	0	100.000	100.00	0	.00	0	0	100,000	100,000
				U	100,000	100,00	0.	.00	U	U	100,000	100,000
DP 161 - Libby 2				0	74.007	74.00	7 0	00	0	0	74.704	74.70
-)7	2.00	0	0	74,997	74,99	1 2.	.00	0	0	74,794	74,794
DP 163 - Public			^		10.500	10.50		00			10.151	10.15
)7	1.00	0	0	43,580	43,58	0 1.	.00	0	0	43,461	43,461
DP 164 - Comm			ng Staffing									
-)7	1.00	0	0	40,207	40,20	7 1.	.00	0	0	40,098	40,098
DP 165 - Enviro			6									
-)7	1.00	0	0	37,188	37,18	8 1.	.00	0	0	37,090	37,090
DP 166 - Adult I		0										
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DP 187 - Enviro	nmental Lab	oratory Chem	ist									
C)7	1.00	0	0	45,880	45,88	0 1.	.00	0	0	45,752	45,752
DP 275 - Genetic	cs Program -	State Special	Revenue - SB	275								
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DP 3011 - AIDS	Prevention		*			, ,,,,,						
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DP 3111 - Monta				3	O	, , , , , 0	. 0.		Ü	Ü	Ü	
	ana 100aee0)7	4.00		4,375,275	83,646	4,458,92	1 4	.00	0	4,289,835	83,412	4,373,247
DP 3601 - Tribal				1,515,415	05,040	7,730,72	. 4.	.00	Ü	1,207,033	05,412	7,575,247
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Tota	aı	14.00 \$	775,917 \$	5,353,949	\$1,606,316	\$7,736,18	2 14.	.UU (\$	545,928)	\$5,268,381	\$1,605,047	\$6,327,500

<u>DP 101 - Prior Year Authority-Local Inspection Funds - OTO - The legislature approved \$100,000 state special revenue each year of the biennium to pass funds through to local contractors. These funds, a portion of the food and consumer safety license fee, were collected in prior years and were withheld when performance standards were not met. The appropriation would allow PHSD to distribute these funds for activities related to improving performance in this area.</u>

The funds represent the fees collected and not distributed, and once used this reserve will be eliminated. PHSD has requested that this appropriation be designated as one-time-only to keep it from being in the base budget.

<u>DP 117 - Clinical Laboratory Specialist - The legislature approved the executive request for \$91,632 state special revenue over the biennium for a clinical laboratory specialist to work in the Public Health Laboratory. Workloads have increased 21.6 percent over the last five years while staffing has remained constant. The position would be supported by fee income.</u>

<u>DP 155 - Rural Access to Emergency Devices Grant - The legislature approved an additional \$275,000 federal revenue each year of the biennium for the Health Resources and Services Administration Automatic External Defibrillator grant. This request continues a three-year grant for rural access to emergency devices, designed to achieve improved outcomes</u>

from cardiac arrests by providing education and automated external defibrillators to emergency medical services personnel in rural areas of Montana. This grant will continue through July of 2006.

<u>DP 156 - Comprehensive Cancer Control Program - The legislature appropriated an additional \$150,000 federal authority each year of the biennium for the Comprehensive Cancer Control (CCC) Program. The funds would support activities and the process to complete a written Montana CCC Plan. This effort will be coordinated through DPHHS and will be used to support a statewide stakeholder group and small workgroups. The ultimate goal of this effort is to increase cancer awareness and preventive screening among Montanans.</u>

<u>DP 158 - Smoke Detector & Fall Prevention Grant - The legislature added \$145,000 federal funding each year of the biennium for a federal smoke detector and fall prevention grant. This funding would continue the second year of a three-year funding cycle. Funds would be spent in collaboration with several fire departments around the state to target residential occupancies for long-life smoke alarm installation and home fire and injury prevention education.</u>

<u>DP 159 - Statewide Emergency Preparedness Staff - The legislature added about \$270,000 in federal authority over the biennium, including funds for 3.00 new FTE. The funding supports a food safety laboratory scientist, chemical terrorism laboratory coordinator, and administrative support for public health emergency communications and training. These FTE are already on board in modified level positions.</u>

The chemical terrorism laboratory coordinator is responsible for developing a plan that ensures preparedness for the possibility of a chemical terrorism event. The food safety laboratory scientist is responsible for development and implementation of laboratory methods capable of identifying both biological and chemical contamination of food supply items. The administrative support position supports state and local public health and emergency response personnel, making print and electronic resources available to communicate health information to the media, the public, and special populations, and coordinating training opportunities using traditional and distance learning modalities.

<u>DP 160 - Early Childhood Comprehensive System Grant - The legislature appropriated \$100,000 federal funds each year of the biennium for the Early Childhood Comprehensive System Grant. This grant supports states in collaborative early childhood system development, with the ultimate goal of supporting families and children who are healthy and ready to learn at school entry. This grant would allow the department to design a plan for an Early Childhood Comprehensive System in Montana.</u>

Federal agencies determined that multiple funding mechanisms aimed at specific populations (Head Start), services (mental health services and physical health screenings), and programs were not being linked at state or local levels, creating lack of cohesiveness, and potentially ineffective strategies for supporting young children and families. There are five specific areas of focus that states are to target in their plan development:

- Medical homes
- o Mental health and social emotional development
- o Early care and education
- o Parent education
- o Family support

<u>DP 161 - Libby Asbestos Program Staffing - The legislature added \$74,830 federal revenue each year of the biennium, including funding for 2.00 FTE, one program manager and one administrative assistant, for the asbestos program in Libby, Montana. Both positions are currently filled and this request makes funding for the positions permanent.</u>

The program manager is a registered nurse who supervises the day-to-day activities of the field office and three employees. This individual interacts with patients being screened for asbestos related disease, assists in the pulmonary screening of patients, explains screening results to patients, and assure that they are referred as appropriate for their medical condition.

The administrative assistant helps in the determination of an individual's eligibility to participate in medical screening for asbestos related diseases, and conducts a confidential, in-depth, computer assisted, epidemiologic interview. This individual also assists in educating participants and scheduling other medical screening activities for them.

<u>DP 163 - Public Health Planner - The legislature added funding for 1.00 FTE and \$87,041 federal funds over the biennium to make permanent the current modified position of public health planner. This position is responsible for public health planning activities including providing data and support for state and local health assessment and health improvement planning. Work products include county health profiles, reports on the state of the state's health, and a PHSD strategic plan.</u>

The legislature added language to the appropriations act to remove funding for the FTE if federal funds supporting this FTE are discontinued or if the funds are not received. The language also prohibits the Office of Budget and Program Planning from requesting funds to continue the FTE in the 2009 biennium, if the federal funding is not ongoing.

<u>DP 164 - Communicable Disease Monitoring Staffing - The legislature added about \$40,000 federal funds</u>, including funds for 1.00 FTE, each year of the biennium to make permanent the current modified position of health program specialist for communicable disease monitoring. The position is responsible for development and implementation of standards-based electronic lab reporting and messaging, web browser-based data entry and data management, centrally integrated data storage and exchange, and analysis and reporting capability (i.e., Geographic Information System (GIS) capacity). This position is responsible for coordinating and integrating preparedness activities into existing public health infrastructure, assuring coordination with public health system improvement efforts, and coordination with other stakeholders in disaster and emergency related activities (e.g. fire, emergency medical services, law enforcement, medical practitioners, local and tribal governments, other state and federal agencies and local public health).

The legislature added language to the appropriations act to remove funding for the FTE if federal funds supporting this FTE are discontinued or if the funds are not received. The language also prohibits the Office of Budget and Program Planning from requesting funds to continue the FTE in the 2009 biennium, if the federal funding is not ongoing.

<u>DP 165 - Environmental Public Health Tracking Staff - The legislature added about \$37,000 federal funding, including funds for 1.00 FTE, each year of the biennium to make permanent the current modified position of environmental public health tracking program specialist. The duties of this position include addressing environmental health concerns and developing a public health tracking network.</u>

The legislature added language to the appropriations act to remove funding for the FTE if federal funds supporting this FTE are discontinued or if the funds are not received. The language also prohibits the Office of Budget and Program Planning from requesting funds to continue the FTE in the 2009 biennium, if the federal funding is not ongoing.

<u>DP 166 - Adult Lead Reporting - The legislature added \$25,000 federal funds each year of the biennium for the adult lead reporting program. Currently, PHSD contracts with the National Institute of Occupational Health and Safety to report adult lead levels and is reimbursed \$25,000 annually for this activity. While funding is still dependant on federal budgeting, the amount requested appears to be available through the next biennium.</u>

<u>DP 172 - Increase Funding for MT Disability & Health Prog - The legislature added \$450,000 federal funds each year of the biennium, to coordinate and provide services to prevent secondary conditions and improve the health of Montanans with disabilities. Secondary conditions are health conditions that are acquired after the onset of a primary disability. Examples of common secondary conditions in adults with developmental disabilities include weight problems, dental problems, and bladder dysfunction. This grant is expected to continue for five years.</u>

<u>DP 187 - Environmental Laboratory Chemist - The legislature added \$91,632 federal funds over the biennium for a chemist to work in the Environmental Laboratory.</u> This chemist would validate, implement and perform the new laboratory tests for chemical terrorism. These tests have been developed by Centers for Disease Control and Prevention but have not yet been available in Montana.

<u>DP 275 - Genetics Program - State Special Revenue - SB 275 - The legislature added \$1.7 million in state special revenue and decreased general fund by \$1 million over the biennium contingent on passage and approval of SB 275, which increases the fee charged for each Montana resident insured by an individual or group disability or health policy from 70 cents to \$1 through the end of the 2007 biennium. The statewide genetics program (50-19-211, MCA) provides testing, counseling, and education to parents and prospective parents.</u>

<u>DP 3007 - MIAMI - Biennial - The legislature approved a general fund biennial appropriation of \$1.1 million to continue the Montana Initiative for the Abatement of Mortality in Infants (MIAMI) program at the level of the 2005 biennium. During the 2005 biennium, these services were funded through a one-time diversion of tobacco settlement funds authorized in 17-6-606, MCA (SB 485).</u>

<u>DP 3011 - AIDS Prevention - Biennial - The legislature added \$84,000 general fund over the biennium for AIDS prevention and control. This general fund provides part of the state match for federal grant funds. Base level expenditures for the AIDS program were \$2.2 million in federal funds and about \$48,000 in state special revenue from the Prevention and Stabilization Account (PSA) approved by the 2003 Legislature for the 2005 biennium only. Previous to the 2005 biennium, the legislature approved \$48,000 general fund each year for AIDS funding from the general fund.</u>

<u>DP 3012 - Poison Control - Biennial - The legislature approved the executive request to add \$77,908 in general fund over the biennium to continue poison control services at the level of the 2005 biennium. During the 2005 biennium, these services were funded through a one time diversion of tobacco settlement funds authorized in 17-6-606, MCA (SB 485).</u>

<u>DP 3111 - Montana Tobacco Use Prevention Program - The legislature added \$9 million in tobacco settlement state special revenue and \$167,000 in federal funds over the biennium for the Montana Tobacco Use Prevention Program. This funding will fund the program at the percentage designated 17-6-606, MCA (enacted by citizen Initiative 146). This decision package also makes permanent 2.00 modified FTE funded with federal tobacco prevention funds and funds 2.00 new FTE.</u>

<u>DP 3601 - Tribal Peer Counseling Program - The legislature added \$60,000 general fund over the biennium for a pilot program for Tribal peer counseling as part of the state effort in tobacco prevention and control. The legislature requested that the department provide interim reports so that the legislature could monitor implementation and outcomes due to this legislative initiative.</u>

Language

The legislature approved the following language for inclusion in HB2:

"Federally Funded FTE includes \$244,624 in federal special revenue over the biennium to support 3.00 FTE and operating costs for public health planning and tracking. Inclusion of expenditures, including personal services costs, for item federally funded FTE in the fiscal year 2006 base budget is contingent on renewal and continuation of federal grant funds to support those functions.

If Senate Bill No. 275 in not passed and approved, funding in the Public Health and Safety Division is increased by \$545,991 in general fund money in fiscal year 2006 and by \$545,928 in general fund money in fiscal year 2007 and decreased by \$832,794 in state special revenue in fiscal year 2006 and by \$832,794 in state special revenue in fiscal year 2007."